

PROHIBITION AND THE RETURNED SOLDIER; A WORD OF CAUTION.

Ernest H. Scammell, F. C. I. S., secretary of the Military Hospitals Commission of Canada, recently visited the New York State Department of Health and brought a number of direct and important suggestions which are discussed in the July number of Health News. Inasmuch as we wish to avoid the mistakes of the other warring nations, our readers will be interested in the following excerpt:

"The problem of the returned soldier," says Mr. Scammell, "has been cut in half where prohibition has prevailed."

"Mr. Scammell points to the general popular desire to 'fill up' the returned soldier. He has done his bit, the theory is, and treating is in order. With a full realization of the seriousness of the problem, even Quebec, which is not one of the dry provinces of Canada, closes its bars at nine o'clock and all day Sunday as a war measure, and prohibits treating altogether. British Columbia is at present the only Canadian province where it is legal to treat the returned soldier."

"So serious was the problem of inebriates among returned soldiers in the earlier years of the war, that the Military Hospitals Commission contemplated starting an inebriates' home. But prohibition and the consequent removal of the trouble made further talk of it unnecessary. In Ontario, indeed, the jail population became so greatly reduced, as a direct result of prohibition, that it was possible for the authorities to take over one reformatory for a convalescent hospital."

Book Reviews

Asthma, presenting an exposition of the non-passive expiration theory. By Orville Harry Brown. 36 engravings. St. Louis. Mosby Co. 1917.

Brown looks upon asthmatic dyspnoea as a mechanical interference with the bronchial blood and lymph circulation due to heightened intra-alveolar tension, this in turn being due to non-passive expiration. Inflammatory processes in the bronchi are usually responsible for most of the swelling found in asthma. Careful observation on 50 cases studied by Brown apparently confirm his theory. Admitting its correctness unfortunately brings us but little nearer our goal, i. e., the relief of our patients. The problems that remain are well stated. The literature has been carefully gone over and the absence of any recent review on this subject gives Brown's work an added value. We would especially urge its perusal by those specialists who still look upon asthma as a disease to be cured by nasal surgery or injections of "soups" made from cosmopolitan bugs.

R. B.

The Surgical Clinics of Chicago, Volume I Number III (June 1917). Octavo of 231 pages, 70 illustrations. Philadelphia and London. W. B. Saunders Company. 1917. Published Bimonthly. Price per year: Paper \$10.00, Cloth \$14.00.

Contents.

Pulsion diverticulum of esophagus. Removal Murphy button from stomach 2½ years after gastro-enterostomy. Hernia of diaphragm. Carcinoma of jejunum. Vaginal hysterectomy for carcinoma of cervix uteri. Internal hydrocephalus. Pyloric obstruction following sulphuric acid poisoning. Thrombo-angitis obliterans. Varicocele. Obstinate sciatica. Gunshot wound of skull. Calcanéo-cavus. Local anesthesia for hemorrhoidectomy. Reconstruction of hepatic duct. Pancreatic abscess. Resection stomach for carcinoma. Operative and radiotherapeutic treatment of uterine

myomas. Perineorrhaphy. Therapeutic abortion and sterilization. Salpingitis. V-shaped hysterectomy for dysmenorrhea and leukorrhea. Treatment of burns with special reference to prevention of deformities. Mediastinal tumor. Hallux vagus. Regional surgery.

The Medical Clinics of North America. Volume I, Number 1 (The Johns Hopkins Hospital Number, July, 1917). Octavo of 193 pages, 14 illustrations. Philadelphia and London: W. B. Saunders Company, 1917. Published bi-monthly. Price per year: Paper, \$10.00; cloth, \$14.00.

Contents—Hodgkin's disease with extensive skin eruption. Postural albuminuria. Diabetes with disturbances of external secretion of pancreas in syphilitis. Meningitis of unknown etiology. Atrial fibrillation muscular tissue. Progressive muscular atrophy. Essential hypertension. Dietetic treatment diabetes. Acromegaly. Combined scleroderma, Raynaud's disease and chronic arthritis. Hypertension. Dermoid cyst of mediastinum. Milroy's disease. Gastropotosis. Visceroptosis and chronic appendicitis. Medical after-care of surgical patients after abdominal operations.

Eye, Ear, Nose and Throat. Edited by Wood, Andrews and Shambaugh. Volume III of Practical medicine series for 1917. Chicago: Yearbook Publishers, 1917. Price \$1.50.

Contents—Examination of eye. Hygiene of eye. Refraction. Diseases of eyelids, conjunctiva, lachryman apparatus, cornea and sclera, uveal tract. Crystalline lens. Retina and optic nerve. Ocular muscles. Toxic amblyopia. Glaucoma. Eyeball and orbit. General diseases and ocular symptoms. Injuries. Military surgery of eye. Ocular therapeutics. New instruments. Comparative ophthalmology. Middle ear. Internal ear. Septum and sinuses. Mouth. Tongue. Pharynx. Adenoids and tonsils. Endoscopy of bronchi and esophagus. Bronchi and trachea. Larynx.

Experimental Pharmacology. By Dennis E. Jackson. St. Louis. Mosby Co. 1917.

It is only the exceptional man who can give out again what he has learned—who can remember all the details that bothered him when he was a student. Dr. Jackson has produced a book so richly illustrated and so full of detail that it must always be an ideal one for students, and for instructors taking charge of laboratory courses in pharmacology. One has only to turn over the pages of this book to see how rapidly pharmacology is taking its place amongst the exact sciences.

The only criticism that we would make, and we believe it is a serious one, is that in drawing the many excellent illustrations the artist seems to have forgotten entirely that there are such things as anti-vivisectionists. There are a large number of drawings of dogs which do not show the method of anesthesia. Others do not show clearly that they are dissections, and all could easily be used by the antis with telling effect. To be sure, the anti-vivisectionists would think nothing of redrawing the illustrations with an ether mask erased, but it is flying in the face of Providence to give them twenty or thirty figures that do not need retouching. Besides, these plates show experiments not for original research but for class instruction. According to the antis these are useless and doubly objectionable. This book may undo much of the work done by those who are trying to protect medical research. Everyone who reports the results of animal experiments must keep constantly in mind the possibility that his paper will be read not only by those who accept as a matter of course that anesthesia was used, but by others who will gladly misconstrue his words, and use them to damn all research workers.

W. C. A.